# Reflecting on Fear and Relationship

#### Sean Carr

**Abstract:** This reflection is by an MSW early on in my career on the ways social work has made me more afraid, and how fear can undermine and erode relationships. Ultimately, I conclude that unconditional positive regard and relationship-centered practice are the heart of social work. I hope to cultivate kinder, gentler, and friendlier social work practice throughout my career.

Keywords: unconditional positive regard, relational, empathy, learning, education

I didn't used to be afraid of very much. When I started my MSW program, I didn't have any big phobias. Now, I'm afraid of car crashes. I'm afraid of being paralyzed—I don't even bike on the road anymore; I miss cycling, but there are no paved bike paths nearby and I can't bring myself to go in the street now. I'm afraid of some lurking chronic illness that will invade my body and debilitate my life. I'm afraid of degenerative cognitive diseases, widow-maker heart attacks, and aneurysm strokes. I'm afraid something could happen to me—a brain injury or something—and make me a more violent person—someone who hurts and traumatizes. I'm afraid of those things because now I know people they've happened to. They feel a lot closer—a lot more real and possible—than they used to.

I think the hardest part of social work is that we get battered, constantly, by the worst things that ever happen to people, by the worst things we ever do to each other. Then we get home and turn on the news. We try to keep up with even more terrible things—war in Ukraine, genocide in Yemen, some cop murdering a black kid and some white news pundit ranting about all the ways he deserved it. Because we're supposed to do something about that, too—or at least care about it. It's like watching this constant stream of horror, misery, and despair. I think maybe seeing all that suffering all the time can hurt. It makes you sad. It makes you cynical. It makes you afraid.

Fear must be one of the most unpleasant adaptations that have evolved in humans. It convinces us not to trust, not to help. It drives us apart, permeates our lives—makes us wonder if that black kid did do something to deserve it—you know, because he's different than me. I remember seeing a Far Side cartoon or something similar years ago, but I can't for the life of me find it now, of cavemen cautiously jabbing a piece of fruit with sticks and then running away in fear. On a second panel, an exasperated God watches on a TV and yells at the screen, "WHAT THE %@!# ARE YOU DOING, YOU'RE SUPPOSED TO EAT IT!" Maybe something similar happens in social work; maybe we get afraid of things, we get afraid of people, and we poke at them with sticks to see if they're going to attack or explode—to see if they're as volatile as we suspect they might be. We keep a safe distance while we pull out manuals to label all the things wrong with them—to put names to the diseases we think are floating around in their minds, the disorders that might be embedded into their personalities—and we do all this despite knowing

more than anything else in our field that it's unconditionality and relationship that heal. I think maybe that cartoon that takes on an all-knowing deity would be yelling at us, "What are you doing? You're supposed to be their friend."

# **Nolan the Terrifying**

In nearly a full year working in his elementary school, I've never successfully gotten a planned intervention off the ground with "Nolan." He just won't have it. Nolan is precocious and playful. He's wickedly smart in all the ways that exasperate his teachers most. If Nolan thinks he's in the right, he's not about to give in just because you're an adult and he's nine. But, as an impartial observer, I've got to say, when Nolan thinks he's in the right, he's usually in the right. On three separate occasions I've seen this precocious, incisive third grader back teachers into argumentative corners where their only recourse is to admit they're wrong or pull the "I'm right because I'm the adult" card. All three times, the teacher has picked the latter. Bad choice. Both because it's just a mean and senseless thing to do, but also because it inevitably leads Nolan to a nuclear-level meltdown. Evacuate the classrooms, close off the hallways, call in the national guard, etc. etc. etc.

Nolan is brilliant, funny, perceptive, and genuinely kind. He's also carrying a burden of trauma beyond my ability to even begin to comprehend. His dad viciously beat him and everyone else in his family from the time he could walk until the day his dad went to prison, when Nolan was six. A year later, his mom remarried. Her new husband regularly attacked her, hit Nolan, and sexually abused his sister—right up until *he* went to prison for trying to kill Nolan's mom. After his stepdad's arrest, Nolan's mom couldn't take care of him or his sister anymore—she dropped them at their grandma's house for a "weekend sleepover." They haven't heard from her since.

Nolan's traumatic experiences (obviously) manifest in his behavior, to the exasperation of his teachers. It's predictable stuff—he's a kid with severe developmental trauma, he can be easy to upset, it can take a lot to help him calm down. He doesn't respond well to threats or ultimatums (but let's be honest, who really does?), and he's just begging the adults around him to care about something, *anything*, other than simply his obedience and compliance (Perry, 2017).

For the third straight week, I introduce an idea for a session. For the third straight week, Nolan's response: "Why are we doing *that?*"

"Well, I think it might help us learn more about each other, and maybe it'll help you think and talk more about some of those tough things that happened at your house you've been telling me about. That could help you feel a little better, and I'd really like to help you feel better. What do you think?"

Nolan draws his knees to his chest, wraps his arms around them, and contorts his mouth into a steep frown, "There's only one thing that'll make me feel better."

I lean in; I can just *feel* that Nolan wants to tell me something important. "What would help?"

"If you play Chromebook games with me."

I mean, I did say I wanted to help him feel better...

After that session, Nolan started getting more excited every time he saw me in the hallway. Now, without fail, if we pass by each other, he jumps out of his class line, stops me, and says he has to tell me something. I squat down to listen. They're always just little updates about whatever cool thing he's recently done, seen, or learned. I excitedly agree with how awesome it is that he got to hold an iguana, or whatever it is that day. We bump fists and walk our separate ways.

Nolan's behavior remains inconsistent. He gets upset, he melts down, he yells and screams and says things so wildly inappropriate they would make my grandmother faint. It triggers something in the adults around him. Teachers wonder what it means about their proficiency if they can't keep Nolan calm and productive in class. They're afraid it makes them bad at their jobs. I'm afraid too—I'm afraid that my coworkers resent me for not "fixing" Nolan fast enough. I'm afraid that administrators at their wits end are wondering why they bothered hiring this social worker when nothing ever changes. I'm more afraid of what this all might mean about our lives, though. I'm afraid that I'm lurking a little closer to tragedy, despair, and horror than I ever knew before—if it can happen to Nolan, after all, it could happen to anyone. And what if there's no fixing it? What does it mean if our deepest wounds never fully close, or will always bear jagged, messy scars?

Holding all that fear and uncertainty, seeing up close profound pain and suffering, I think social workers find themselves at a crossroads. Turn one direction and maybe we try to convince ourselves we can control more than we thought we could—it's reassuring to believe we *can* bring order to chaos. How? Well, we could invest in our own authority, heap on restrictions, punish harshly, stamp out every symptom, and force the jagged piece back into line through raw power and brute force. Or perhaps we lean on the promise and cold rationality of modern science, research, and evidence-backing. If we can convince ourselves that the right interventions, objectively, must bring about healing, that must mean that no one, including ourselves, is ever sentenced to suffer forever. But maybe instead, we should turn the other way, refuse to indulge in some delusion that we are in control of anyone or anything, and instead just seek solace in connection and simple, human kindness.

Nolan still hurts in ways more painful and profound than any injury I've ever suffered. He still goes home and wonders where his mom is, when she'll come back for him, if his dog is okay with her, if she still loves him. I don't know how to heal pain that deep—I don't think anyone does. I don't think the secret is in a diagnosis or ten sessions of the perfect manualized intervention. I just think it's always going to hurt. But maybe it hurts a little bit less if there's someone there you like spending time with, who you know and trust likes you too. Someone who isn't there to force your obedience—and who can say, "Screw it, let's play Chromebook games"—when you feel like it's the only thing in the world that'll make you feel any better.

## It's the Relationship that Heals

The unconditional therapeutic relationship is the biggest change factor in social work practice. That's not a controversial opinion—it's been intuited, documented, and (somehow) even quantified (Lambert, 2013). Helen Harris Perlman (1979), one of the most brilliant thinkers our field has ever produced, wrote an entire book on it that she titled *Relationship: The Heart of Helping People*. It's one of the most knowable truths our intensely ambiguous field has. Irvin Yalom and Carl Rogers have spent careers seemingly begging us to just accept and integrate that truth more centrally into everything we do. When asked in an interview to give his biggest piece of advice to the therapy field, Yalom (2018) said,

Well, I'm afraid that I'm going to have to defer to Carl Rogers on that. As he always said, the important thing about psychotherapy is the relationship and the empathy, the genuineness, and the unconditional positive regard that the therapist brings to it. These days people talk a lot about empirically validated therapy, but there's nothing that's more empirically validated than Rogers's assumptions about the therapeutic relationship. (para. 21)

## The Courage of Relationship-Centered Social Work Practice

I wonder if fear might be what most often gets in the way of unconditionality and relationship. Whatever field you're in, everyone's perspective gets skewed. If you work as a violent crime scene cleaner, a murderous death probably feels a lot more likely. If your job is surprising people with those giant Publisher's Clearing House sweepstakes checks every day, you'd never guess that the odds of winning their jackpot are 1 in 7.2 billion (Publisher's Clearing House, 2024). To you, it's just something that happens all the time! If you spend your day trying to help people navigate the fallout from the worst things they've ever experienced—profound childhood trauma, a devastating car crash, the infinite pain of losing the one you loved most—the world can start to look like a chaotic, violent, frightening place. That is, unless you can find a way to keep the chaos at arm's length. Maybe by telling yourself they're different than you. They didn't work hard enough, they made mistakes you would never have made, there's a moral defect in play that's being karmically punished. But if you want to do this job well—if you want to do the

job that people seeking social work service deserve—maybe you just have to spend some time being afraid. Because the alternative, the distance, is unacceptable, unhelpful, and just wrong. Maybe then relationship-centered, unconditional social work practice is an act of more profound courage than we give it credit for.

I don't claim to be some brilliant expert social worker, and I don't claim to be someone so smart you ought to take my advice. But I'll tell you what I'm going to do next. I'm going to ride my bike in the road. I'm going to turn off the goddamn news for a little bit. I'm going to read something heartwarming instead of gut-wrenching. And every day, I'm going to try to be a little bit kinder, gentler, and friendlier to every person who walks into my office than I was the day before. There are decades of knowledge building in front of me, a thousand evidence-based practices to learn, hundreds of continuing education credits to earn. I know so close to nothing it's laughable. But I do know that if I can do those things, I'll be a better social worker for it. And I think if you do them too, so will you.

#### References

Lambert, M. J. (2013). The efficacy and effectiveness of psychotherapy. In M. J. Lambert (Ed.), *Bergin and Garfield's handbook of psychotherapy and behavior change* (6th ed., pp. 169–218). Wiley.

Perlman, H. H. (1979). *Relationship: The heart of helping people*. The University of Chicago Press.

Perry, B. D., & Szalavitz, M. (2017). The boy who was raised as a dog: And other stories from a child psychiatrist's notebook: What traumatized children can teach us about loss, love, and healing. Basic Books.

Publisher's Clearing House. (2024). *Sweepstakes facts*. PCH. https://rules.pch.com/viewrulesfacts/?mailid=martv24#facts

Yalom, I. (2018, March/April). Irvin Yalom on the possibilities of aging. *Psychotherapy Networker*. https://www.psychotherapynetworker.org/article/irvin-yalom-possibilities-aging/

**About the Author:** Sean Carr, MSW, LLMSW (he/him) is School Social Worker and Graduate, University of South Carolina, Columbia, SC (<u>scarr6612@gmail.com</u>).